PRINT ORDER

	I OKDER	`	You are herek	y authorized	to ma	nutacture and si	ship t	the followi	ng describ	ed product in a	accordanc	e with the purchase	order and spe	ecifica	tions indicated.		
DEPARTMENT REQ. NO.				D.					DATE			HASE ORDER NO.	PRINT	PRINT ORDER NO.			
CONTRACTOR Marvin Marcus (800) 766-3142 ext 18								JACKET NO.			ESTIM	ESTIMATED COST		SHIP/DEL DATE			
TITLE								OBJECT	CLASS	STATE COD	DE CONTR	R'S CODE	PROGR	RAM N	0.		
PROOFS SETS DATE DUE TO GOV'T					DAYS GOV'T RETURN DATE WILL HOLD TO CONTR.				APPROPRIATION CHARGEABLE			BILLING ADDRESS CODE (BAC)	QUANT	QUANTITY			
Page					\perp			Phototype	COMPOSITION Cold Type Hot Metal		QUALIT	QUALITY LEVEL		TRIM SIZE			
Slugs MATERIAL Manuscript	FURNISHED 1	O CONTR Halftone		Line Illus.		amera Copy	N	legatives		Binders	Other						
TEXT STOCK COVER STOCK					K				OF TEXT PAGE	S FOLD-I	N STOCK						
FOUR COLOR PROCESS PRNTG. INK Cover1 , 2 , 3 , 4 , Text Cover								COVER PRINTS				FOLD-INS/FORMS STRIP Face Only Face & Back			NEGATIVES (No. req)		
	1 ULC Sew			Band in Un	Band in Units of			Round Drill Holes			" in dian	" in diameter on" side			inches c. to c.		
ග	Saddle	Trim 4	Sides	Shrink Film Wrap Units of			- 1	Center holes			inch		edge of sheet.				
BINDING	Side Per		n Fold	Other			٦ _F	Pads of sheets/			/sets each.	Pad on the		side. Chipboard required.			
<u> </u>	Perfect Adhesive		ve Strip					Pack				per shipping container.		Pallets required			
DISTRIBL	JTION							RETURN	NEGS TO	GPO FOR STO	RAGE N	O YES					
									RETURN ORIG. AND/OR NEGS. TO:								
DEPARTMENTAL AUTHORITY (signature and title) PU						IDI I	URCHASE OBLIGATION				ID.	ATE CENT TO	SENT TO CONTRACTOR				
DELYCTIMENTAL HOVELL (PIGURINE RIIG IIIE)						FU	IKCHASE	OBLIGATIO)N		DF	DATE SENT TO CONTRACTOR					
	TOR TO COMP TON, DC 20401		TTOM PORTIO	N AND MAIL E	ENTIRE	FORM TO: COM	MPTI	ROLLER-F	ME, FINAN	ICIAL MANAGE	MENT SEF	RVICE, U.S. GOVERN	IMENT PRINT	ING O	FFICE,		
Contractor Invoice No.							Date Prepared										
Date of De	livery/Shipment									Discou	unt Terms						
ARTICLES OR SERVICES				QUANTITY				COST		JNIT PRICE PER		AMOUNT					
	DITIONAL SPA			JR INVOICE								TOTAL					
I CERTIFY	THAT THE MA	TERIALS, (GOODS, OR SE	RVICES HAV	/E BEE	N DELIVERED/S	SHIP	PED ON T	HE DATE I	NDICATED ABO	OVE, AND	THAT PAYMENT OR C	CREDIT HAS N	NOT BE	EEN RECEIVED.		

The penalty for making false statements to the Government is prescribed in 18 USC 1001

(Signature of person authorized to sign)